



CITY OF SAINT PAUL
Christopher B. Coleman, Mayor

375 Jackson Street, Suite 220
Saint Paul, Minnesota 55101-1806

Telephone: 651-266-9090
Facsimile: 651-266-9124
Web: www.stpaul.gov/dsi

COMPETENCY CARD APPLICATION
(For Reciprocal Only)

Applicant's Last Name										First		Middle Initial		Phone Number			
Applicant's Address																	
City				State				Zip									
EMPLOYER'S NAME:																	
Enclose completed competency card application, a copy of your current Minneapolis competency card and payment (\$17.00 for each card) to the above address. Checks must be payable to City of Saint Paul.																	
PLUMBERS: ENCLOSE A COPY OF STATE PLUMBING LICENSE																	
TRADES				Master Comp Card				Journeyman Comp Card									
Gas Burner A																	
Oil Burner A																	
Plumbing/Gas Fitter																	
Refrigeration A																	
Steam A																	
If paying by credit card, please complete the following:										Master Card		Exp. Date:					
										Visa		Month/Yr					
Enter Your Account Number in the Boxes Below:																	
Date:				Name of Applicant						Signature of Applicant (Required for all charges)							

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